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ether with applicable fee(s), to:

**Box ISSUE FEE** 

Assistant Commissioner for Patents

Washington, D.C. 20231

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| maintenance for mound                                                                                                                                                                                           | BUODS.                                             |                                                                                  | 4.1                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                        | arate "FEE ADDRESS" for             |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|----------------------------------------------------------------------------------|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------|--|
| CURRENT CORRESPONDENCE ADDRESS (Note: Legishy mark-up with any corrections or user Block 1)  26584 7590 01/15/2002  OTIS ELEVATOR COMPANY INTELLECTUAL PROPERTY DEPARTMENT 10 FARM SPRINGS FARMINGTON, CT 06032 |                                                    |                                                                                  |                                                                                    | Note: The certificate of mailing below can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.  Certificate of Mailing  I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below. |                                                                        |                                     |  |
|                                                                                                                                                                                                                 |                                                    |                                                                                  |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                        |                                     |  |
|                                                                                                                                                                                                                 |                                                    | ر ر                                                                              |                                                                                    | Tr Jaur                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Forces                                                                 | (Signature)                         |  |
|                                                                                                                                                                                                                 |                                                    |                                                                                  | <u>L</u>                                                                           | March                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 14,2002                                                                | (Date)                              |  |
| APPLICATION NO.                                                                                                                                                                                                 | FILING DATE                                        |                                                                                  | FIRST NAMED INVENTO                                                                | OR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ATTORNEY DOCKET NO.                                                    | CONFIRMATION NO.                    |  |
| 09/577,558                                                                                                                                                                                                      | 09/577,558 05/24/2000                              |                                                                                  | Pedro S. Baranda                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | OT-4190B                                                               | 7708                                |  |
| TOTAL CLAIMS                                                                                                                                                                                                    | APPLN. TYPE                                        | SMALL ENTITY                                                                     | ISSUE FEE                                                                          | PUBLICATION FE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                        | DATE DUE                            |  |
| 26                                                                                                                                                                                                              | nonprovisional                                     | NO                                                                               | \$1280                                                                             | \$0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | \$1280                                                                 | 04/15/2002                          |  |
| EXA                                                                                                                                                                                                             | MINER                                              | ART UNIT                                                                         | , CLASS-SUBCLA                                                                     | SS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                        |                                     |  |
| TRAN,                                                                                                                                                                                                           | THUY VAN                                           | 3652                                                                             | 187-254000                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                        |                                     |  |
| but not required.  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The Address indication (or "Fee Address" Indication form PTO/SB/47) attached.              |                                                    |                                                                                  | or agents OR, all<br>single firm (havi<br>attorney or agent<br>registered patent a | the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.                                                                                                                                                                                                                                                                              |                                                                        |                                     |  |
| 3. ASSIGNEE NAME A                                                                                                                                                                                              | ND RESIDENCE DATA                                  | A TO BE PRINTED ON                                                               | THE PATENT (print or t                                                             | type)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                        | <del></del>                         |  |
| PLEASE NOTE: Unle                                                                                                                                                                                               | ss an assignee is identifited to the USPTO or is b | ed below, no assignee da<br>eing submitted under sep                             | ta will appear on the pat                                                          | ent. Inclusion of assig<br>of this form is NOT a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | nee data is only appropriat<br>substitute for filing an assig<br>NTRY) | e when an assignment has<br>nament. |  |
| Otis Elevator Company Farmington, Connecticut                                                                                                                                                                   |                                                    |                                                                                  |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                        |                                     |  |
| <b>791</b> 1 1 d                                                                                                                                                                                                | *                                                  |                                                                                  | • • • • • • • • •                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                        |                                     |  |
|                                                                                                                                                                                                                 |                                                    | r categories (will not be pr                                                     |                                                                                    | Ci marvidum Akci                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | rporation or other private gr                                          | toup entity 'a government           |  |
| 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.                                                                                                 |                                                    |                                                                                  |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                        |                                     |  |
| ZPublication Fee                                                                                                                                                                                                |                                                    |                                                                                  | Payment by credit card.                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                        |                                     |  |
| XXAdvance Order - #                                                                                                                                                                                             | of Copies <u>12</u>                                | DO                                                                               | The Commissioner is he eposit Account Number                                       | reby authorized by ch                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | arge the required fee(s), or one close an extra copy of this           | credit any overpayment, to form).   |  |
| The COMMISSIONER application identified ab                                                                                                                                                                      |                                                    | ADEMARKS is requested                                                            | d to apply the Issue Fee a                                                         | and Publication Fee (i                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | fany) or to re-apply any pre                                           | eviously paid issue fee to the      |  |
| (Authorized Signature) Sean W. O'B                                                                                                                                                                              | PANA                                               | (Date)                                                                           | /14/02                                                                             | 03/27/2002 MGE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | BREN2 00000066 150750                                                  | 09577558                            |  |
| NOTE; The Issue Fee                                                                                                                                                                                             | and Publication Fee (i                             | required) will not be a<br>y or agent; or the assign<br>tates Patent and Tradema | cepted from anyone<br>ee or other party in                                         | 01 FC:142<br>02 FC:561                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 1280.00 CH<br>36.00 CH                                                 |                                     |  |

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